AWARD NUMBER: CDMRP-16-0-DM167047

TITLE: En Route Care in Confined Spaces: Impact of Transport, Immobilization Practices, Space Constraints, and Medical Awareness Enhancements

PRINCIPAL INVESTIGATOR: Rachel Kinsler

CONTRACTING ORGANIZATION: U.S. Army Aeromedical Research Laboratory Forth Rucker, AL 36362

REPORT DATE: October 2017

TYPE OF REPORT: Annual

PREPARED FOR: U.S. Army Medical Research and Materiel Command Fort Detrick, Maryland 21702-5012

DISTRIBUTION STATEMENT: Approved for public release; distribution is unlimited.

The views, opinions and/or findings contained in this report are those of the author(s) and should not be construed as an official Department of the Army position, policy or decision unless so designated by other documentation.

REPORT DOCUMENTATION PAGE

Form Approved OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS.

1. REPORT DATE	2. REPORT TYPE	3. DATES COVERED (From - To)
October 2017	Annual	15 Sep 2016 - 16 Sep 2017
4. TITLE AND SUBTITLE En Route Care in Confined Spaces: Impact of Transport, Immobilization Practices, Space Constraints, and Medical Awareness Enhancements		5a. CONTRACT NUMBER
		5b. GRANT NUMBER CDMRP-16-0-DM167047
		5c. PROGRAM ELEMENT NUMBER
6. AUTHOR(S) Ms. Rachel Kinsler Dr. Marcy Helgeson rachel.e.kinsler.civ@mail.mil		5d. PROJECT NUMBER
		5e. TASK NUMBER
		5f. WORK UNIT NUMBER
7. PERFORMING ORGANIZATI U.S. Army Aeromedical Resea Building 6901 Fort Rucker, AL 36362	ON NAME(S) AND ADDRESS(ES) arch Laboratory	8. PERFORMING ORGANIZATION REPORT NUMBER
9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) U.S. Army Medical Research and Materiel Command Ft Detrick, MD 21702-5012		10. SPONSOR/MONITOR'S ACRONYM(S)
		11. SPONSOR/MONITOR'S REPORT NUMBER(S)

12. DISTRIBUTION / AVAILABILITY STATEMENT

Approved for public release; distribution is unlimited.

13. SUPPLEMENTARY NOTES

14. ABSTRACT

This group of research projects was designed to look at various aspects of transport, immobilization, optimal physical space, ergonomics, and enhancement of medical awareness. Outcomes of the project will provide significant information and tools that can be used toward increasing a patient's safety, providing more effective patient care, reducing patient and medic discomfort, and the development of vibration mitigation systems.

15. SUBJECT TERMS

16. SECURITY CLASSIFICATION OF:		17. LIMITATION	18. NUMBER	19a. NAME OF RESPONSIBLE PERSON	
a. REPORT U	b. ABSTRACT U	c. THIS PAGE U	OF ABSTRACT UU	OF PAGES: 10	19b. TELEPHONE NUMBER

Table of Contents

		<u>Page</u>
1.	Introduction	1
2.	Keywords	1
3.	Overall Project Summary	1
4.	Key Research Accomplishments	3
5.	Conclusion	3
6.	Publications, Abstracts, and Presentations	4
7.	Inventions, Patents and Licenses	4
8.	Reportable Outcomes	4
9.	Other Achievements	4
10.	References	4
11.	Appendices	6

1. INTRODUCTION:

This group of research projects was designed to look at various aspects of transport, immobilization, optimal physical space, ergonomics, and enhancement of medical awareness. Outcomes of the project will provide significant information and tools that can be used toward increasing a patient's safety, providing more effective patient care, reducing patient and medic discomfort, and the development of vibration mitigation systems.

2. KEYWORDS:

paramedic, vibration, ergonomics, en route care, posture, critical care tasks, workspace, pressure points, immobilization, litter, patient handling

3. OVERALL PROJECT SUMMARY:

Project 1: Impact of Transport Forces and Immobilization Practices on Patient Physiology

- (1) Evaluate the effect of patient weight as a factor on supine biodynamic response for board verses no board
- (2) Quantify forces/motions during patient handling such as litter dropping and litter loading/unloading
- (3) Evaluate effects of patient strapping protocols and tension applied on supine biodynamic response
- (4) Determine the transmitted forces and pressure points on the body during transport
- (5) Refine best practices of patient en route care management

The contract necessary for the model development and data analysis portions to be performed by extramural partner ActiBioMotion was approved on 25 SEP 2017. Patient weight research protocol was written and is currently in review by the PI and ActiBioMotion. All CITI training documentation, conflict of interest, and curriculum vitaes have been collected for all study personnel. Subject recruitment materials, questionnaires, informed consent, safety, and device documents for the first two protocols are currently under development.

Draft of patient handling protocol has been written and is currently under review with a mechanical engineer.

Two protocols still need to be written and submitted.

A project kickoff meeting was held with the members of ActiBioMotion.

The team intends to work concurrently on subprojects 1 and 2 to bring Project 1 back onto the schedule reported in the SOW of the original proposal.

Study Design: Healthy human subjects will act as simulated patients, and be subjected to vibration and shock inputs while various factors are tested against common procedures. Mathematical models will be developed. Project 2: Optimal Physical Space for En Route Care: Provider Postures and Health (1) Administer survey of En

Test plan for data collection using the posture survey has been written.

The survey for this test plan has been drafted and revised by the Site/Project PI, Rachel Kinsler.

Identification of test participant populations is in progress.

Litter loading protocol has been drafted and is currently in review with the PI.

Two more protocols to be written and submitted.

The team intends to work concurrently on subprojects 1 and 2 to bring Project 2 back onto the schedule reported in the SOW of the original proposal.

- Route Care providers regarding posture
- (2) Perform litter loading/unloading assessment focused on Medic posture
- (3) Evaluate the ergonomics of postures assumed during En Route Critical Care (ERCC) tasks
- (4) Define and test countermeasures for awkward postures

En Route Care providers will perform ERCC tasks in the confined space of common medical interiors. Postures assumed by the providers, and related health complaints, will be modeled. Countermeasures will be defined.

Project 3: Medical Awareness Enhancements during Transport

(1) Examine feasibility of incorporating medical device audio alarms with aircraft communications

The team is working on connections between this ICS and medical monitoring devices from the standard medical equipment set. Test plan is being written.

One test plan and four protocols need to be written and submitted.

The team intends to work concurrently on subprojects 1 and 2 to bring Project 3 back onto the schedule reported

- (2) Perform human factors evaluation of the Transport Telemedicine System (TTS)
- (3) Evaluate impact of TTS on Flight Paramedic's administration of Critical Care tasks
- (4) Incorporate hands-free documentation procedures using TTS while performing medical tasks
- (5) Evaluate quality of patient data collected by Paramedics with TTS

in the SOW of the original proposal. This project may warrant revision of subprojects to prevent duplication of effort with other funded projects. The Principal Investigator will consult with the Science Officer for guidance.

4. KEY RESEARCH ACCOMPLISHMENTS:

Nothing to report.

5. CONCLUSION:

These projects described above will impact military health care by (1) developing guidelines that can reduce secondary damages to the patients during transport; (2) creating assessment tools to develop better patient vibration mitigation technologies and more effective patient transport systems; (3) providing recommendations for countermeasures to reduce the impact of awkward postures and loading procedures assumed by care providers; and (4) capturing critical patient data in the medical evacuation environment without compromising medical provider administration of critical care tasks. These goals complement on-going DoD areas of research into the effects of the transport environment on patients and care providers, telemedicine, far forward documentation of patient conditions and interventions, and enhanced medical monitoring.

Future Plans:

Project 1

The patient weight and handling research protocols will be reviewed by the PI and ActiBioMotion. The protocols will then be submitted to USAARL's Regulatory Compliance Office for IRB submission and approval. All CITI training documentation, conflict of interest, and curriculum vitaes have been collected for all study personnel. Subject recruitment materials, questionnaires, informed consent, safety, and device documents for the first two protocols are currently under development. The last two protocols will be drafted. Data collection will begin in the next calendar for the two protocols.

Project 2

The test plan for data collection using the posture survey will be reviewed by the PI and finalized for submission to USAARL's Regulatory Compliance Office. The survey for this test plan will be finalized and submitted with the test plan. Identification of test participant populations will continue. Litter loading protocol will be reviewed by the PI and finalized for submission to USAARL's Regulatory Compliance Office. The last two protocols will be drafted. Data collection will begin under the test plan and the first protocol.

Project 3

One test plan to test efficacy of connections between this ICS and medical monitoring devices from the standard medical equipment set will be completed.

6. PUBLICATIONS, ABSTRACTS, AND PRESENTATIONS:

Nothing to report.

7. INVENTIONS, PATENTS AND LICENSES:

Nothing to report.

8. REPORTABLE OUTCOMES:

Nothing to report.

9. OTHER ACHIEVEMENTS:

Nothing to report.

10. REFERENCES:

Project 1 References

DeShaw, J., Rahmatalla, S., Comprehensive Measurement in Whole-Body Vibration, Journal of Low Frequency Noise, Vibration and Active Control, Vol. 31 (2), pp. 63-74, 2012.

DeShaw, J., Rahmatalla, S., Predictive discomfort in single-and combined-axis whole-body vibration considering different seated postures, Human Factors, 56(5), pp. 850-863, 2014.

DeShaw, J., Rahmatalla, S., Predictive Discomfort of Supine Humans in Whole-Body Vibration and Shock Environments, Ergonomics, Vol. 29, pp. 1-14, 2015. 14http://dx.doi.org/10.1080/00140139.2015.1083125, 2015.

Kinsler, R., Barazanji, K., Lee, J., Fulton, L., Hatzfeld, J. Analysis of Two Surveys Examining Enroute Care Technologies, Platforms, and Space Requirements. Poster Presentation at Military Health System Research Symposium. August 2015.

Linares HA, Mawson AR, et al. Association between pressure sores and immobilization in the immediate post-injury period. Orthopedics 1987;10: 571-573.

Meusch, J., Rahmatalla, S., 3D transmissibility and relative transmissibility of immobilized supine humans during transportation, Journal of Low Frequency Noise, Vibration and Active Control, 10.1260/0263-0923.33.2.125, 33(2), pp. 125-138, 2014.

Meusch, J., Rahmatalla, S., Whole-body vibration transmissibility in supine humans: effects of board litter and neck collar, Applied Ergonomics, doi: 10.1016/j.apergo.2013.09.007, 2013, 45 (3), pp. 677–685, 2014

Rahmatalla, S., DeShaw, J., Barazanji, K., Effect of Spinal-Immobilization Systems on Supine-Human Biodynamics during Transportation, In Review, Air Medical Journal, 2015.

Ratanalert, S., Phuenpathom, N., Saeheng, S., Oearsakul, T., Sripairojkul, B., Hirunpat, S. ICP Threshold in CPP Management of Severe Head Injury Patients, Surg Neurol, 61(5):429-34 (2004).

Reno, J., Military aeromedical evacuation, with special emphasis on craniospinal trauma, Neurosurg Focus 28 (5):E12 (2010).

Wang, Y., Rahmatalla, S., Three-Dimensional Modeling of Supine Human and Transport System under Whole-body Vibration, Journal of Biomechanical Engineering, 135(6), 061010-13,doi:10.1115/1.4024164, 2013.

Project 2 References

Alvarez T., Semmlow J., "Short Term Adaptation Exists in the Disparity Vergence System Exhibited by a Decrease in the Response Dynamics", Proceedings of the second joint EMBS/BMES conference, Huston, TX, USA, Oct. 23-26, 2002.

Barazanji, K., Eslinger, A., Brown, D., Hildebrandt, G., Squire, C., Eddins, J., Oldorf, L., Bowers, B., Wilson, R., and Warren, J. 2015. Aeromedical Evacuation Enroute Critical Care Validation Study. Fort Rucker, AL: U.S. Army Aeromedical Research Laboratory. USAARL Technical Report 2015-07.

Buckle, P., Devereux, J. 2002. The nature of work-related neck and upper limb musculoskeletal disorders. Applied Ergonomics. 33(3): 207-17.

Chaffin, D.B. 1973. Localized muscle fatigue – definition and measurement. Journal of Occupational Medicine. 15(4): 346-54.

Gallagher S., Hamrick C.A., Redfern M.S., "Effects of posture and technique on forces experienced when hanging continuous miner cable", Proceedings of the human factors and ergonomics society, v2, Designing for Diversity, pp. 779-784, 1993.

Gallagher S., Marras W.S., Davis K.G., Kovacs K., "Effects of posture on dynamic back loading during a cable lifting task", Ergonomics, v45, n5, pp. 380-398, 2002.

Golob, R., and Sykes, M. 2002. Workplace guidelines for the prevention of musculoskeletal injuries: a joint initiative. Victoria, British Columbia: B.C. Government and Service Employees' Union & British Columbia Public Service Employee Relations Commission.

Guo, H-R. 2002. Working hours spent on repeated activities and prevalence of back pain. Occupational and Environmental Medicine. 59: 680-688.

Kinsler, R., and Barazanji, K. 2011. Assessment of fixed position litter loading in the HH-60M MEDEVAC helicopter. Fort Rucker, AL: U.S. Army Aeromedical Research Laboratory. USAARL Technical Memorandum 2011-19.

Lester, J.D., Hsu, S., and Ahmed, C.C. 2012. Occupation hazards facing orthopedic surgeons. American Journal of Orthopedics. 41(3): 132-9.

Steiner, L; Bauer E., Cook A., Cornelius K., Gallagher S., Rethi L., Rossi E. W., Turin F., Wiehagen W., Collaborative ergonomics field research: An assessment of risk factor at four mines. Mining Engineering, v 56, n2, pp. 41-48, 2004.

Stobbe T.J., Bobick T.G., Plummer R.W., Musculoskeletal injuries in underground mining. Ann. Am. Conf. Gov. Ind. Hyg. v 14, pp. 71-76, ACGIH 14:71–76, 1986.

William J. W., Fred C.T., "Ergonomic assessment of musculoskeletal risk factors at four mine sites: Underground Coal", Surface Copper, Surface Phosphate, and Underground Limestone, CDC, IC 9475, Information Circular, 2004.

Project 3 References

Beach, J. 2014. Transport telemedicine system (ICS) IPT update. Fort Detrick, MD. PM ICS.

Jones, D. 2012. Test plan for the secure telemedicine evaluation (Roamer/Tempus Exercise). Fort Rucker, AL. Test plan 2012-023

Jones, D. 2013a. Addendum to USAARL test plan 2013-022. Fort Rucker, AL

Jones, D. 2013b. Secure Telemedicine Evaluation Roamer/Tempus Exercise. Fort Rucker, AL.

Jones, D. 2015. Airworthiness and Flight Demonstration Plan for the Telemedicine C4ISR Exercise 2015. Fort Rucker, AL.

Thompson, E. 2012. Army explores tactical 4G telemedicine. Aberdeen Proving Ground, MD. Retrieved 10 December 2015 from http://www.army.mil/article/87550/Army_explores_tactical_4G_telemedicine/.

11. APPENDICES:

None.

En Route Care in Confined Spaces: Impact of Transport, Immobilization Practices, Space Constraints and Medical Awareness Enhancements DM167047 Joint En Route Care Award - Intramural

PI: Rachel Kinsler

Org: U.S. Army Aeromedical Research Laboratory

Award Amount: \$3,750K

Study/Product Aim(s)

- Evaluate the effect of patient weight as a factor under two immobilization conditions including litter with no backboard and litter with board.
- Quantify forces/motions during patient handling to include litter dropping and
- Evaluate effects of patient strapping protocols and the amount of tension applied using current
- transmitted to the supine human body under whole-body vibration and repeated shock will be Determine the transmitted forces and pressure points on the body during transport. Forces quantified.
- Refine best practices of patient en route care management to include immobilization and strapping procedures
 - Define countermeasures for awkward postures in the form of posture changes, patient positioning or litter pan height adjustment.
- Evaluate impact of TTS on Flight Paramedic's administration of En Route Critical Care tasks.
- Incorporate hands-free documentation procedures using TTS while performing En Route Critical
- Evaluate quality of patient data collected by Paramedics with TTS.

Plans will be written for each sub-project. Volunteers will be used for data collection. The team will use USAARL's research JUH-60A for aircraft data collection.

Fimeline and Cost

16

Activities

for projects 1-3 subprojects 1 and 2. Develop protocols for projects 1-3

subprojects 3 and 4. Complete

data collection subprojects 1,

subprojects 2-3, projects 1-3.

Analyze collected data.

Complete data collection

projects 1-3.

subprojects 4, projects 1-3. Conduct data analysis and Complete data collection

Develop protocols and test plans



Survey has been written to collect data from U.S. Army medical personnel on awkward posture and injuries caused by these postures while performing medical tasks; team working to identify subject populations/units.

Goals/Milestones (Example)

CY16 Goal - Protocol writing

20

19

☑ Draft protocols for all sub-project 1 tasks

CY17 Goals - Protocol writing and approval

□Complete data collection for all subtask 1s □Submit all subtask protocols for approval

CY18 Goal - Data collection and analysis

Complete data collection for all subtasks 2-3 ☐ Analyze collected data

□ Complete data collection for all subtasks 4 CY19 Goal - Data collection and analysis

CY20 Goal - Data reporting ☐ Analyze collected data

□Analyze collected data ☐Report findings Comments/Challenges/Issues/Concerns Nothing at this time.

Projected Expenditure: \$750K **Budget Expenditure to Date** Actual Expenditure: \$750K

\$750K

Updated: 10 NOV 2017

Estimated Budget (\$3.75M)